## **MURUJUGA ABORIGINAL CORPORATION**

## PO BOX 1544, KARRATHA WA 6714 APPLICATION FOR GROCERY CARD

## APPLICANT DETAILS:

Surname: First Name:	Solico Wom the Store
Residential address:	NOTES: Office Use Only
I would like my grocery card to be sent to the following address (please complete if different to your residential address):	
Email address:	
Phone/mobile:	
Date of birth:/	
I would like a Grocery Card for (tick one box only):	
Coles Woolworths	
<u>DECLARATIONS</u>	
I declare that I am a member of YES NO MAC:	
APPLICANT SIGNATURE:	
DATE:	
Applications can be sent via:	
<ul> <li>Email: <u>Applications@murujuga.org.au</u></li> <li>Post: PO Box 1544, Karratha WA 6714</li> </ul>	
Please allow up to:	
<ul> <li>7 – 14 business days for MAC to receive an application if sent by</li> <li>5 – 7 business days for MAC to process the application once it h</li> </ul>	

Aboriginal Corporation

FOR OFFICE USE ONLY	
Date application received:	
The Applicant is a member of MAC as defined in the Rule Book:	□ YES □ NO
The Applicant has been a member of MAC since on or before 1 January 2020:	□ YES □ NO
Date application processed:	
Date letter to Applicant advising of decision sent: Date Grocery Card sent to Applicant's	
nominated address:	
Grocery Card Number:	
Registered post reference:	
Staff name:	
Signature:	